

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Aska		04/08/01
O.I.P.E. CLASSIFIER		12	
FORMALITY REVIEW	A.T	1071	05/07/01
RESPONSE FORMALITY REVIEW	ll	907	7-24-01

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	
1	04/08/01
2	✓
3	✓
4	0
5	0
6	0
7	0
8	✓
9	✓
10	0
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	✓
19	0
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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Sc 876  
Jul. 23, 01